

Health and Safety Practices in Child Care during COVID-19

Agenda



Welcome

PHSKC Health and Safety Guidance based on FAQs

Live Q&A via Chat Box

Survey

The Child Care Health Program staff includes:

- Public health nurses
- Mental health consultants
- Nutrition consultant
- Community health professionals

Staff offer virtual and phone consultation, training and health resources to promote the health and safety of all children in child care.

Child Care Health Program Team



Steve Shapiro Program Manager



Ellen Flamiatos Lead Nurse



Deborah Waugh Administrative Assistant





Anita Alkire, Nurse Yolanda Morris, Nurse



Sarah Leong, Nurse



Megan Holmes, Mental Health Consultant



Phala Chea, Mental Health Consultant



Katherine Ngo, Mental Health Consultant



Lesley Raunig, Nurse





Lynn Nguyen, Nurse Lauren Greenfield, Nurs.



Janis Harsila Nutritionist



Muna Houssen Community Health Professional



Viviana López Community Health Professional

Virtual Meeting Guidelines

- ☐ Join on time, leave as you need, and be respectful of and kind to all participants.
- ☐ Mute your microphone for this presentation. This presentation will be recorded, so please turn off your camera if you do not want to be recorded.
- ☐ To ask a question, click on the Chat icon at the bottom of the Zoom window and type in it. The icon looks like this:
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 - Please keep your questions clear and brief.
- ☐ In addition to questions, feel free to share what's been working for you at your site.

Reminders

Please know COVID-19 information changes daily, so the Child Care Health Program is unable to know everything about it.

The Child Care Health team will, however, be able to offer you clarity around best practices, the WAC, and methods to reduce the spread of the virus among children in your care *and* you as their providers.

There will be ongoing opportunities to have consultation with and support from the Child Care Health team in the coming weeks.

Reminders

You may find that there are differences in the guidance issued by local, state, and national entities. King County is currently more heavily impacted by COVID-19 than many other regions throughout the state and country. Public Health—Seattle & King County's guidance reflects our commitment to protecting the health and safety of our residents in light of our unique local circumstances.



PHSKC Health and Safety Guidance based on FAQs

Q: If the kids just cough, can they still come to daycare?

	WAC standards and CCHP recommendations pre-COVID-19	Recommendations and guidance during COVID-19
Exclusion criteria	See CCHP Health Policy or WACs for full exclusion guidelines. Fever: Exclude children older than 2 months who have a temperature of 101° F with diarrhea, vomiting, earache, headache, sore throat, rash tiredness, or other behavior change	See CCHP Keep Me Home If (for COVID) poster, as WAC exclusion criteria still apply. Change in Fever criteria and additional symptoms added: Exclude if a child (any age) has a temperature of 100.4°F or higher, shortness of breath, cough or other signs of new illness unrelated
	(WAC/CCHP Health Policy).	to a preexisting condition (PHSKC).

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Answer: If the cough is new and not related to a condition the child previously had (like asthma), they should not come to daycare.

Q: If a child has a runny nose and cough but not a history of known cause, are they sent home? When can they return?

Answer: this sounds like a **new illness** so yes, they should be sent home and told to contact their health care provider. Child can return after at least 7 days after symptom onset AND 3 days (72 hours) after recovery. Recovery means being fever-free without the use of fever-reducing medication, and seeing an improvement in respiratory symptoms.

• So... If a child is excluded for COVID-like symptoms, then they may return 7 days after symptom onset AND 72 hours after symptoms have improved. For some, this may mean feeling completely back to normal by day 5, but needing to wait for the 7 days before returning to child care. For others, this may mean that at day 6, they still have a pretty bad cough that has not gotten better so they will still need to wait another 72 hours after the cough improves to return to care.

Q: Do we need to set up a handwashing sink outside?

Answer: No – it's fine if staff and children wait to wash hands until coming in from outside time. Using hand sanitizer for children over 2 years is an option while outside, but it shouldn't be used if the hands are visibly dirty, as it won't be effective.

Q: Is it safe for children to use hand sanitizer? Do we need a signed authorization by parents to use it with children over age 2?

Answer: Per WAC, hand sanitizer is considered a "nonmedical item" and a parent or guardian must annually authorize an early learning provider to administer it.

If using hand sanitizers for children:

- Child needs to be over 24 months old
- It must contain at least 60% alcohol to be effective
- Hand sanitizer should not be used in place of proper handwashing
- It cannot be used when hands are visibly soiled or dirty
- Children must be actively supervised when using hand sanitizers to avoid ingestion or contact with eyes, nose, or mouths.

Q: How should we clean carpets during COVID-19? Should sofas be disinfected?

	WAC standards and CCHP recommendations pre-COVID-19	Recommendations and guidance during COVID-19
Carpets/large area rugs	Vacuum daily when children are not present. Clean at least once every 6 months using a carpet shampoo machine or steam cleaner. For infant rooms, clean at least once per month. For infant rooms, place a blanket under infant while infant is playing on larger carpet or rug (WAC/CCHP Health Policy).	Same guidance (CCHP Health Policy).
Sofas	Clean at least twice each year using a carpet shampoo machine or steam cleaner (CCHP Health Policy).	Same guidance (CCHP Health Policy).

Q: Should we be sanitizing outside equipment and climbers? After each use?

	WAC standards and CCHP recommendations pre-COVID-19	Recommendations and guidance during COVID-19
Outside time	 Infants spend 20 minutes per every 3 hours of programming outdoors, as tolerated. Toddlers spend 20 minutes per every 3 hours of programming outdoors. If they are in care for a full day, they are allowed 60 to 90 minutes of moderate to vigorous activity, of which 30 minutes may be indoor activities. 	Try adapting projects kids normally do in the classroom to an outdoor setting. For example, try doing circle time or art projects outside in order to increase distance between each child. Stagger, or alternate, outdoor playtime to help limit the number of children in each classroom.
	 Preschool-age and older spend 30 minutes per every 3 hours of programming outdoors. If they are in care for a full day, they are allowed 90-120 minutes per day of moderate to vigorous activities, of which 30 minutes may be indoor activities. (CCHP Health Policy) 	Use the 3-step method to clean, rinse, and disinfect high-touch parts of playground equipment (handrails, swings, tricycles, etc.) before and after group use, especially between groups (CCHP). If this is not feasible, shift to different outdoor activities. DOH does not recommend using play structures such as climbers or slides.

Q: Does bleach actually kill the virus that causes COVID-19, or is it ammonia-based products?

Answer: Many different active ingredients in cleaning products kill the virus that causes COVID-19 (for a complete list, see the <u>EPA-registered disinfectants</u>.) However, *in child cares*, using the diluted solutions of unscented bleach you're used to mixing for sanitizing and disinfecting is considered safe for children.

NEVER mix bleach and ammonia-based products. It causes a chemical reaction that leads to toxic gas that is harmful and can be deadly if inhaled. Store bleach separate from other cleaning materials that may contain ammonia (like glass cleaners).

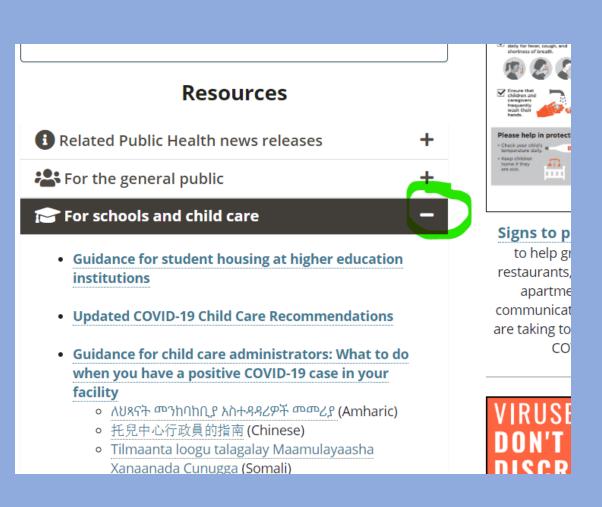
Q: What is the recommended ratio? Should we be trying to reduce class size to under 10 individuals?

	WAC standards and CCHP recommendations pre-COVID-19	Recommendations and guidance during COVID-19
Group size/ratios	Ratio should be maintained for the youngest child in the classroom Infants – 1:4 ratio Toddlers – 1:7 ratio Preschool – 1:10 ratio (WAC)	Ratios per WAC still need to be maintained. Reducing a group sizes to a total of 10 people (10 includes staff and children) is a social distancing strategy for child cares. This helps to create more space in the classroom for each person to maintain a 6-foot distance apart, as best as they can.

To access resources on the Public Health Seattle & King County website:

Go to www.kingcounty.gov/covid

Scroll down to "Resources"



There you can find:

- Posters for child cares
- Checklist for child cares
- Fact sheets for families
- Guidance if you have a positive case in your facility



For additional resources on Child Care Health Program:

• Go to www.kingcounty.gov/childcare

You will find:

- Fact sheets for families
- "Keep Me Home If" posters
- Resource on cleaning and sanitizing/disinfecting your child care
- Video recordings of virtual calls



Questions from Providers

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 - Please keep your questions clear and brief.
- ☐ Please avoid using identifiable health information in your question such as name, birthday, gender, etc.
- ☐ In addition to questions, feel free to share what's been working for you at your site.

Wrap Up

 Public Health – Seattle & King County (PHSKC) COVID-19 page: <u>www.kingcounty.gov/covid</u>

www.kingcounty.gov/childcare

- Watch for a follow-up email with these slides and resources from community partners, including DEEL, BSK, and CCR.
- Please take the survey via the URL in the chat box.
- We hope to see again next Wednesday, April 29th at 1:30pm!